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Hospital for Consumption and  
Diseases of the Chest, Brompton,  
S.W.



# MEDICAL REPORT

FOR THE YEAR 1903.



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*With the Compliments of the Committee of Management  
of the Brompton Hospital.*



# MEDICAL REPORT

FOR THE YEAR 1903.

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# HOSPITAL FOR CONSUMPTION AND DISEASES OF THE CHEST, BROMPTON S.W.



The RESIDENT MEDICAL OFFICER, the ASSISTANT RESIDENT MEDICAL OFFICER and the PATHOLOGIST, present to the COMMITTEE OF MANAGEMENT the MEDICAL and PATHOLOGICAL REPORTS for the year 1903.

The total number of patients admitted to the wards was above the average, but the number dealt with in this report is less than usual, because the system of binding the notes has been altered from a classification according to the year of admission to one based on the year of discharge. Therefore in a first report of this nature patients who came into the Hospital during the latter end of the preceding year are omitted, as they have been already reviewed in the previous report; while those admitted during the corresponding period of the present year will be incorporated in the report for the year of their discharge.

Some additional tables have been introduced dealing with the results of treatment, and of factors in the ætiology of Tuberculosis.

1903 is the first complete year in which treatment has been carried out under conditions of natural ventilation.

During the year a new operating theatre has been opened, and a system of aseptic surgery introduced.

The method of separating patients according to their diseases has been successful.

## DEFINITIONS.

---

An **Acute Case** is one which is admitted direct from the Out-Patient Department, out of turn, since, in the opinion of the Assistant Physicians, definite benefit would thus result.

A **Casualty Case** is a case which, coming as a patient to the Hospital, is, although unsuitable for admission, too ill to send home in a cab.

Patients for small surgical operations are also admitted under this heading.

The results of treatment are classed as follows:—

M.I.	...	...	...	...	Much improved.
I.	...	...	...	...	Improved.
I.S.Q.	...	...	...	...	<i>In statu quo.</i>
N.S.W.	...	...	...	...	Not so well.

A patient who has "Much Improved" is one who is in every respect better than on admission, the temperature having become normal; dyspnoea disappeared; physical signs largely, if not entirely, cleared up, the extent of this depending on the number of lobes affected at the time of admission; no complications having supervened, or, if present on admission, having disappeared. Such a patient must have been up all day and have gained weight. On an average such patients have gained over a pound and a half a week.

Under the heading "Improved" are classed all patients who have made definite progress towards recovery, although not to the same extent as the preceding class. All factors are taken into consideration, but a patient who had progressed markedly in some respects, but not so well in others, would be classified under this head rather than as "Much Improved." No one feature has particularly controlled classification.





# CASES TREATED IN THE HOSPITAL DURING THE YEAR 1903.

Cases in the Hospital on December 31st, 1902	...	317	(See report for 1902)
Cases admitted and discharged during 1903	...	1088	
Cases remaining in the Hospital on December 31st, 1903	...	316	(See report for 1904)

Total admissions during 1903	...	1404
Total discharges during 1903	...	1405

The cases both admitted and discharged during 1903 alone are dealt with in this report ; they number 1088.

Men	...	662
Women	...	426

## COMPRISING :—

	Men.	Women.
Ordinary Cases...	533	343
Acute Cases	57	26
Casualty Cases...	72	57
	662	426

# TUBERCULOUS AND NON-TUBERCULOUS CASES.

	Men.		Women.		Total.	
	No.	%	No.	%	No.	%
Tuberculous	486	73·4	267	62·6	753	69·2
Non-Tuberculous	176	26·6	159	37·4	335	30·8

## CASES ADMITTED AND DISCHARGED DURING 1903.

DISEASES FOR WHICH PATIENTS WERE ADMITTED.	MALES.			FEMALES.			TOTAL.
	Ord. Cases.	Acute Cases.	Cas. Cases.	Ord. Cases.	Acute Cases.	Cas. Cases.	
Pulmonary Tuberculosis...	428	15	29	242	6	15	735
Pulmonary Tuberculosis & Pleural effusion ... ..	—	5	—	1	—	—	6
„ „ and Empyema ...	1	1	—	1	—	—	3
„ „ Pneumothorax ...	2	2	1	—	2	—	7
„ „ Aneurism of Aorta ...	1	—	1	—	—	—	2
Chronic Bronchitis and Emphysema ... ..	41	1	1	8	1	1	53
Asthma ... ..	—	—	—	2	—	—	2
Bronchitis and Bronchial Catarrh	5	2	2	9	—	1	19
Pneumonia ... ..	—	—	1	—	2	—	3
Broncho-pneumonia ... ..	—	1	—	1	—	—	2
Bronchiectasis ... ..	17	5	2	5	1	—	30
Pleurisy without effusion ...	2	—	—	—	—	—	2
Pleurisy with effusion ... ..	1	6	—	1	2	—	10
Emphysema ... ..	1	2	—	—	—	—	3
Adherent Pleura ... ..	1	—	—	1	—	—	2
Collapse of Lung after Pleurisy...	—	—	—	1	—	—	1
Hydatid disease of Lung...	—	—	—	—	1	—	1
Sarcoma of Mediastinum...	1	1	—	—	—	—	2
Laryngeal Syphilis ... ..	—	2	1	—	—	—	3
Angina Pectoris ... ..	—	2	—	—	—	—	2
Dilated Heart ... ..	1	—	—	2	—	—	3
Adherent Pericardium ... ..	—	—	—	—	1	—	1
Congenital Heart Disease ...	—	—	—	1	—	—	1
Mitral Stenosis ... ..	1	1	—	15	1	2	20
Mitral Incompetence ... ..	4	1	—	10	—	—	15
Mitral Stenosis and Incompetence	2	1	1	9	3	1	17
Tricuspid Stenosis and „	—	—	—	1	—	—	1
Aortic Incompetence ... ..	—	1	—	—	—	—	1
Aortic Stenosis & Mitral „	3	2	—	—	1	—	6
Aneurism of Aorta ... ..	7	1	1	—	—	—	9
Carcinoma of Oesophagus ...	—	3	—	1	1	—	5
Exophthalmic Goitre ... ..	—	—	—	1	1	—	2
Leucocythæmia ... ..	—	—	—	—	—	1	1
Chronic Interstitial Nephritis ...	—	1	—	1	1	—	3
Uræmia ... ..	—	—	—	1	—	—	1
Spinal Caries, Amyloid Disease	—	—	—	—	1	—	1
Arthritis of Knee ... ..	1	—	—	—	—	—	1
Necrosis of Rib ... ..	1	—	—	—	—	—	1
Abscess over Sternum ... ..	1	—	—	—	—	—	1
Tuberculosis of Genito-Urinary Tract ... ..	1	—	—	—	—	—	1

CASES ADMITTED AND DISCHARGED DURING 1903.—*Continued.*

DISEASES FOR WHICH PATIENTS WERE ADMITTED.	MALES.			FEMALES.			TOTAL.
	Ord. Cases.	Acute Cases.	Cas. Cases.	Ord. Cases.	Acute Cases.	Cas. Cases.	
<i>Admitted under Certificates of Chest Disease :—</i>							
No Chest or other Disease found	7	—	—	13	—	—	20
No Chest Disease, but :—							
Granular Pharyngitis	1	—	—	1	—	—	2
Pharyngeal Catarrh	—	—	—	1	—	—	1
Adenoids     ...     ...	1	—	—	1	—	—	2
Neurosis     ...     ...	—	—	—	2	—	—	2
Gastritis     ...     ...	—	—	—	1	—	—	1
Appendicitis...     ...	—	—	—	1	—	—	1
Chronic Rheumatism	—	—	—	1	—	—	1
Anæmia     ...     ...	—	—	—	6	—	—	6
Lateral Curvature of Spine     ...     ...	—	—	—	1	—	—	1
Left the Hospital before being seen by the Physician in charge	1	1	—	1	1	—	4
<i>Admitted for small Surgical Operations :—</i>							
Tonsils and Adenoids     ...     ...	—	—	25	—	—	32	57
Tuberculous Glands in Neck     ...     ...	—	—	1	—	—	4	5
Tuberculous Knee Joint...     ...     ...	—	—	—	—	—	1	1
Costal Abscess     ...     ...     ...	—	—	1	—	—	—	1
Sinus after Empyema     ...     ...     ...	—	—	1	—	—	—	1
Enlarged Turbinates     ...     ...     ...	—	—	1	—	—	—	1
Examination for Stone     ...     ...     ...	—	—	1	—	—	—	1
Septic Wound of Arm     ...     ...     ...	—	—	1	—	—	—	1
TOTAL     ...     ...	533	57	72	343	26	57	1088

# DEATHS AMONG PATIENTS ADMITTED AND DISCHARGED DURING 1903.

Total Number ... .. 118=10·8 per cent.  
 Men ... .. 82=12·4 per cent. ♦  
 Women ... .. 36= 8·4 „

CAUSES.	MEN.			WOMEN.		
	Ordinary Cases.	Acute Cases.	Casualty Cases.	Ordinary Cases.	Acute Cases.	Casualty Cases.
Pulmonary Tuberculosis ...	41	3	10	21	3	—
Pulmonary { Pneumothorax ...	1	1	1	—	1	—
Tubercu- { Empyema ...	—	1	—	—	—	—
losis and { Peritonitis ...	—	1	—	—	—	—
Pneumonia ... ..	—	—	1	—	—	—
Bronchiectasis ... ..	3	3	1	—	—	—
Hydatid Disease of Lung ...	—	—	—	—	1	—
Sarcoma of Mediastinum ...	1	1	—	—	—	—
Meningitis and Cerebral } Abscess subsequent to } Empyema ... ..	—	1	—	—	—	—
Morbus Cordis ... ..	2	3	—	5	—	1
Aneurism of Aorta ... ..	2	—	2	—	—	—
Carcinoma of Esophagus ...	—	2	—	—	1	—
Chronic Nephritis ... ..	—	1	—	1	1	—
Uræmia ... ..	—	—	—	1	—	—
<b>TOTAL</b> ... ..	<b>50</b>	<b>17</b>	<b>15</b>	<b>28</b>	<b>7</b>	<b>1</b>

## CHRONIC BRONCHITIS AND EMPHYSEMA.

Number of cases admitted:—

Men ... .. 43  
 Women ... .. 10

RESULT.	No.	%	Average duration of stay in weeks.
Much improved ...	7	13·2	11·5
Improved ... ..	40	75·5	10·0
<i>In statu quo</i> ... ..	4	7·5	9·0
Not so well ... ..	2	3·7	12·0
Died ... ..	—	—	—

## BRONCHIECTASIS.

Number of cases admitted :—

Men	...	...	...	...	...	...	24
Women	...	...	...	...	...	...	6

RESULT.	No.	%	Average duration of stay in weeks.
Much improved	3	10·0	20·5
Improved	15	50·0	14·0
<i>In statu quo</i>	5	16·6	7·0
Not so well	—	—	—
Died	7	23·4	8·5

The causes of death in the fatal cases were :—

Acute Bronchitis, two cases ; Recurrent severe Hæmoptysis, Septic Broncho-pneumonia, Pyopneumothorax and Gangrene of the Lung, Cerebellar Abscess and Multiple Cerebral Abscesses, one each.

## PULMONARY TUBERCULOSIS.

Total number of cases admitted—735, comprising :—

RESULT.	MEN.		WOMEN.	
	No.	%	No.	%
Ordinary Cases	428	90·7	242	92·0
Acute	15	3·2	6	2·3
Casualty	29	6·1	15	5·7
TOTAL	472		263	

The Deaths numbered—78 or 10·6 per cent.

Men 54 or 11·4 „  
 Women 24 or 9·1 „

Of the above-mentioned patients 17, 14 men and 3 women, left the Hospital before being examined by the Physician in charge of the case. The remainder on being classified, according to the number of lobes giving physical signs of disease on admission, presented the following percentage distribution.

No. of lobes giving physical signs.	1	2	3	4	5
Men	8·5	14·4	20·5	16·5	40·1
Women	13·8	21·5	24·6	16·5	23·5

## PULMONARY TUBERCULOSIS.

I.—CASES WITH ONE LOBE GIVING PHYSICAL SIGNS OF DISEASE ON  
ADMISSION (39 MEN, 36 WOMEN.)

RESULT.	MEN.							
	Ord.	Acute	Cas.	Total	%	Average length of stay in weeks	Average change of weight in lbs.	Average change per week in lbs.
Much improved ...	20	—	—	20	57.1	10.0	+ 15.1	+ 1.55
Improved ...	11	1	—	12	34.3	11.0	+ 6.8	+ .85
<i>In statu quo</i> ...	1	—	—	1	2.9	9.5	+ 6.7	+ .75
Not so well ...	1	—	—	1	2.9	13.0	- 8.5	- .65
Died ...	1 <sup>1</sup>	—	—	1	2.9	3.5	—	—
In the Hospital less than three weeks	4	—	—	4	—	—	—	—

<sup>1</sup> A case of fatal Hæmoptysis.

RESULT.	WOMEN.							
	Ord.	Acute.	Cas.	Total.	%	Average length of stay in weeks	Average change of weight in lbs.	Average change per week in lbs.
Much improved ...	15	1	—	16	44.4	12.0	+ 15.1	+ 1.40
Improved ...	20	—	—	20	55.5	12.5	+ 7.9	+ .70
<i>In statu quo</i> ...	—	—	—	—	—	—	—	—
Not so well ...	—	—	—	—	—	—	—	—
Died ...	—	—	—	—	—	—	—	—
In the Hospital less than three weeks	—	—	—	—	—	—	—	—

It should be noted that although patients remaining less than three weeks in the Hospital are not classified as improved, not so well, or *in statu quo*, yet ALL DEATHS occurring among such patients ARE INCLUDED under the heading of Died in this and the following tables.

## PULMONARY TUBERCULOSIS.

II.—CASES WITH TWO LOBES GIVING PHYSICAL SIGNS OF DISEASE ON  
ADMISSION (66 MEN, 56 WOMEN).

RESULT.	MEN.							
	Ord.	Acute	Cas.	Total.	%	Average length of stay in weeks	Average change of weight in lbs.	Average change per week in lbs.
Much improved ...	25	2	—	27	41.5	12.0	+ 14.8	+ 1.47
Improved ...	31	2	1	34	52.3	13.0	+ 7.0	+ .66
<i>In statu quo</i> ...	3	—	—	3	4.6	12.0	- 0.4	- .05
Not so well ...	1	—	—	1	1.5	13.0	- 5.0	- .40
Died ...	—	—	—	—	—	—	—	—
In the Hospital less than three weeks	1	—	—	1	—	—	—	—

## II.—Continued.

RESULT.	WOMEN.							
	Ord.	Acute.	Cas.	Total.	%	Average length of stay in weeks	Average change of weight in lbs.	Average change per week in lbs.
Much improved ...	14	—	—	14	25·9	11·5	+ 14·25	+ 1·33
Improved ...	30	—	2	32	59·3	12·5	+ 6·77	+ ·63
<i>In statu quo</i> ...	7	—	1	8	14·8	12·0	- 0·40	Nil.
Not so well ...	—	—	—	—	—	—	—	—
Died ...	—	—	—	—	—	—	—	—
In the Hospital less than three weeks	1	—	1	2	—	—	—	—

III.—CASES WITH THREE LOBES GIVING PHYSICAL SIGNS OF DISEASE ON ADMISSION (94 MEN, 64 WOMEN.)

RESULT.	MEN.							
	Ord.	Acute.	Cas.	Total.	%	Average length of stay in weeks	Average change of weight in lbs.	Average change per week in lbs.
Much improved ...	20	—	—	20	22·7	11·8	+ 14·9	+ 1·37
Improved ...	48	2	—	50	56·8	11·7	+ 6·9	+ ·66
<i>In statu quo</i> ...	11	—	1	12	13·6	10·5	- 0·8	- ·06
Not so well ...	5	—	—	5	5·7	11·6	- 4·1	- ·47
Died ...	1	—	—	1	1·1	8·5	—	—
In the Hospital less than three weeks	6	—	—	6	—	—	—	—

RESULT.	WOMEN.							
	Ord.	Acute.	Cas.	Total.	%	Average length of stay in weeks	Average change of weight in lbs.	Average change per week in lbs.
Much improved ...	5	—	—	5	8·3	11·6	+ 14·0	+ 1·08
Improved ...	33	—	1	34	56·7	12·2	+ 5·7	+ ·55
<i>In statu quo</i> ...	5	1	—	6	10·0	14·0	- 0·7	- ·05
Not so well ...	13	1	1	15	25·0	11·4	- 5·5	- ·55
Died ...	—	—	—	—	—	—	—	—
In the Hospital less than three weeks	3	—	1	4	—	—	—	—



IV.—CASES WITH FOUR LOBES GIVING PHYSICAL SIGNS OF DISEASE ON  
ADMISSION (76 MEN, 43 WOMEN.)

RESULT.	MEN.							
	Ord.	Acute.	Cas.	Total.	%	Average length of stay in weeks	Average change of weight in lbs.	Average change per week in lbs.
Much improved ...	8	—	2	10	13·7	11·5	+ 15·1	+ 1·5
Improved ...	34	2	—	36	49·3	11·7	+ 6·9	+ ·7
<i>In statu quo</i> ...	12	1	—	13	17·8	11·3	— 0·2	Nil
Not so well ...	9	—	—	9	12·3	13·5	— 4·0	— ·3
Died ...	3	—	2	5	6·8	6·0	—	—
In the Hospital less than three weeks	3	—	—	3	—	—	—	—

RESULT.	WOMEN.							
	Ord.	Acute.	Cas.	Total.	%	Average length of stay in weeks	Average change of weight in lbs.	Average change per week in lbs.
Much improved ...	6	—	—	6	14·0	13·5	+ 14·7	+ 1·27
Improved ...	16	—	1	17	39·6	13·5	+ 7·6	+ ·8
<i>In statu quo</i> ...	2	—	1	3	7·0	11·5	— 0·3	Nil.
Not so well ...	13	—	—	13	30·2	11·0	3·3	— ·4
Died ...	4	—	—	4	9·3	8·7	—	—
In the Hospital less than three weeks	—	—	—	—	—	—	—	—

V.—CASES WITH FIVE LOBES GIVING PHYSICAL SIGNS OF DISEASE ON  
ADMISSION (184 MEN, 61 WOMEN.)

RESULT.	MEN.							
	Ord.	Acute.	Cas.	Total.	%	Average length of stay in weeks	Average change of weight in weeks	Average change per week in lbs.
Much improved ...	15	—	1	16	9·0	13·2	+ 16·1	+ 1·41
Improved ...	47	—	4	51	28·8	11·5	+ 6·6	+ ·75
<i>In statu quo</i> ...	27	—	—	27	15·2	14·7	— ·45	— ·04
Not so well ...	34	2	—	36	20·4	11·2	— 3·6	— ·33
Died ...	36	3	8	47	26·5	6·5	—	—
In the Hospital less than three weeks	3	—	4	7	—	—	—	—



## V.—Continued.

RESULT.	WOMEN.							
	Ord.	Acute.	Cas.	Total.	%	Average length of stay in weeks	Average change of weight in lbs.	Average change per week in lbs.
Much improved ...	7	—	—	7	13·0	12·0	+ 13·3	+ 1·2
Improved ...	11	—	—	11	20·4	14·7	+ 5·7	+ ·4
<i>In statu quo</i> ...	6	—	—	6	11·1	13·2	+ ·25	+ ·02
Not so well ...	10	—	—	10	18·5	10·3	- 5·4	- ·37
Died ...	17	3	—	20	37·0	8·3	—	—
In the Hospital less than three weeks	3	—	4	7	—	—	—	—

COMPLICATIONS OCCURRING IN 735 CASES OF PULMONARY  
TUBERCULOSIS IN RELATION (1st) TO EXTENT OF  
DISEASE AND (2nd) TO THE RESULT.

COMPLICATION.	No. of lobes giving physical signs on the admission of the case.						RESULT.		
	1	2	3	4	5	Total.	Much Imp. and Improved.	<i>In statu quo.</i> Not so well.	Died.
THORACIC									
Pleurisy with effusion	—	—	—	—	3	3	—	1	2
Pleurisy without effusion	1	4	3	2	4	14	4	8	2
Empyema ...	—	1	—	—	1	2	—	—	2
Pneumothorax ...	—	—	—	1	5	6	—	2	4
Morbus Cordis ...	—	3	—	3	1	7	5	1	1
Aortic Aneurism ...	—	—	—	—	2	2	1	—	1
Carcinoma of Oesophagus	—	—	—	—	1	1	—	—	1
LARYNGEAL									
Tuberculous Laryngitis	—	5	7	11	37	60	9	27	24
Simple Laryngitis...	—	1	2	—	—	3	2	1	—
Hoarseness of voice, but nothing found in Larynx	—	2	3	—	2	7	6	1	—
Tuberculosis of Pharynx...	—	1	—	—	2	3	1	1	1

COMPLICATIONS OCCURRING IN 735 CASES OF PULMONARY  
TUBERCULOSIS IN RELATION (1st) TO EXTENT OF  
DISEASE AND (2nd) TO THE RESULT.—*continued.*

COMPLICATION.	No. of lobes giving physical signs on the admission of the case.						RESULT.		
	1	2	3	4	5	Total.	Much Imp. and Improved.	<i>In statu quo.</i> Not so well.	Died.
<b>ABDOMINAL</b>									
Appendicitis ... ..	1	—	2	—	1	4	2	2	—
Perityphlitic Abscess ...	—	—	1	—	—	1	—	1	—
Ascites ... ..	—	—	—	—	2	2	—	1	1
Peritonitis following a perforated Tuberculous Ulcer of Intestine... ..	—	—	—	—	2	2	—	—	2
Movable Kidney ... ..	—	—	1	—	—	1	1	—	—
Uterine Fibroid, Polypus	—	—	1	—	—	1	1	—	—
Ischio-rectal Abscess ...	—	—	—	—	3	3	2	1	—
Fistula in Ano ... ..	—	1	2	2	5	10	8	2	—
Persistent Diarrhœa, Slight	—	3	3	6	3	15	9	5	1
"      "      Severe	—	3	10	3	22	38	7	13	18
Severe Dyspepsia ... ..	1	1	3	2	3	10	2	8	—
<b>ARTHRITIC</b>									
Tuberculous ... ..	1	1	—	—	2	4	3	1	—
Non-Tuberculous ... ..	—	2	1	1	—	4	3	1	—
Clubbing of fingers, Slight	1	4	5	3	7	20	11	8	—
<b>VARIOUS.</b>									
Tuberculous Glands ...	1	—	—	1	2	4	2	2	—
Tuberculous Epididymis...	—	—	1	—	—	1	—	1	—
Tuberculosis of Urethra ...	—	—	—	—	1	1	—	1	—
Stricture of Urethra ...	—	—	—	—	1	1	—	1	—
Albuminuria ... ..	—	—	1	—	3	4	—	4	—
Arterio-Sclerosis ... ..	—	—	2	—	—	2	2	—	—
Ichthyosis ... ..	—	—	1	—	—	1	1	—	—
Tonsillitis ... ..	3	2	—	1	—	6	4	2	—
Exophthalmic Goitre ...	—	—	—	—	1	1	—	1	—
Tuberculous Meningitis ...	—	—	—	—	2	2	—	—	2
Congenital Syphilis ...	—	—	—	—	1	1	—	1	—
Gout, Acute ... ..	—	—	2	—	—	2	2	—	—
Lupus ... ..	—	—	1	—	—	1	—	1	—
Necrosis of Rib ... ..	—	—	—	—	2	2	1	1	—
Tuberculous Abscess of Jaw	—	—	—	—	1	1	1	—	—
Dental Abscess ... ..	—	—	—	—	1	1	1	—	—

## PULMONARY TUBERCULOSIS.

Table shewing the **percentage** loss or gain of weight **per week**, compared with the weight on admission for all patients weighed regularly. Classified according to the number of lobes giving physical signs of disease on admission.

No. of lobes ...	MEN.					WOMEN.				
	1	2	3	4	5	1	2	3	4	5
Loss of weight %										
1·8 ...	—	—	—	—	—	—	—	1	—	—
1·7 ...	—	—	—	—	—	—	—	1	—	—
1·6 ...	—	—	—	—	—	—	—	—	—	—
1·5 ...	—	—	—	—	—	—	—	—	—	—
1·4 ...	—	—	—	—	1	—	—	—	—	—
1·3 ...	—	—	—	—	—	—	—	—	—	—
1·2 ...	—	—	—	—	—	—	—	—	—	1
1·1 ...	—	—	1	—	1	—	—	—	1	—
1·0 ...	—	—	—	—	—	—	—	—	—	—
·9 ...	—	—	—	1	2	—	—	—	—	—
·8 ...	—	—	—	—	3	—	—	1	—	3
·7 ...	—	—	—	—	5	—	—	2	1	—
·6 ...	—	—	—	—	2	—	—	1	2	—
·5 ...	—	—	—	1	4	—	1	2	1	1
·4 ...	—	—	1	1	4	—	—	3	—	1
·3 ...	—	1	1	2	4	—	—	3	1	1
·2 ...	—	1	1	2	4	—	1	—	1	1
·1 ...	—	—	5	2	7	—	2	1	1	2
No change ...	—	1	11	9	16	—	1	4	2	4
Gain of weight %										
·1 ...	1	3	3	3	11	—	1	2	2	—
·2 ...	—	2	1	6	6	—	5	2	—	1
·3 ...	2	3	4	3	2	—	3	4	3	2
·4 ...	—	5	8	2	1	4	4	1	3	4
·5 ...	1	4	9	3	4	2	5	9	4	1
·6 ...	4	7	8	2	9	2	3	5	2	—
·7 ...	2	8	5	6	6	7	2	4	3	—
·8 ...	2	4	5	6	5	5	1	3	1	1
·9 ...	2	11	6	2	4	1	9	1	2	2
1·0 ...	2	5	3	6	5	1	3	2	—	1
1·1 ...	5	2	9	1	4	1	4	4	1	1
1·2 ...	1	2	5	2	3	6	2	—	1	3
1·3 ...	1	1	1	1	2	2	1	2	2	—
1·4 ...	4	1	—	—	3	1	1	—	—	2
1·5 ...	1	2	—	—	3	1	1	—	1	—
1·6 ...	1	—	1	—	1	—	—	—	—	—
1·7 ...	1	1	1	2	1	—	1	—	—	1
1·8 ...	2	1	1	1	1	1	1	—	—	—
1·9 ...	1	—	—	—	1	1	—	1	—	—
2·0 ...	2	1	—	—	1	1	—	—	1	—
2·1 ...	—	1	—	—	—	1	1	—	—	—
2·2 ...	—	—	—	—	—	—	—	—	—	—
2·3 ...	—	—	—	—	—	—	—	—	—	—
2·4 ...	2	—	—	—	—	—	—	—	—	—
2·8 ...	—	—	—	1	—	—	—	—	—	—

PULMONARY TUBERCULOSIS.  
CHANGE IN EXTENT OF PHYSICAL SIGNS.\*

Number of lobes giving physical signs of disease on admission.	MEN.				WOMEN.			
	Total No.	Physical signs Diminished.	Physical signs Unchanged.	Physical signs Increased.	Total No.	Physical signs Diminished.	Physical signs Unchanged.	Physical signs Increased.
1	34	27	6	1	36	29	7	
2	65	55	9	1	55	38	15	2
3	87	58	25	4	60	32	16	12
4	68	44	14	10	39	19	11	9
5	130	61	41	28	34	13	16	5

\* Exclusive of fatal cases.

TABLE.—COMPARISON OF THE NUMBER OF LOBES GIVING PHYSICAL SIGNS OF DISEASE ON ADMISSION WITH THE NUMBER GIVING SIGNS ON DISCHARGE.\*

No. of lobes giving physical signs on admission.	NUMBER OF LOBES GIVING PHYSICAL SIGNS ON DISCHARGE.													
	MEN.							WOMEN.						
	Total No.	0	1	2	3	4	5	Total No.	0	1	2	3	4	5
1	34	5	28	1	—	—	—	36	4	32	—	—	—	—
2	65	1	17	44	3	—	—	55	1	6	48	—	—	—
3	87	—	4	5	73	3	2	60	—	1	2	53	2	2
4	68	—	—	2	7	55	4	39	—	—	4	1	30	4
5	130	—	—	—	2	3	125	34	—	—	—	2	1	31

*Explanation.*—This Table shews that of 34 men admitted with physical signs of disease in one lobe, 5 left with no physical signs, 28 still presented signs in one lobe, and in 1 the disease had involved a second lobe. The remaining lines are to be interpreted in the same manner.

\* Exclusive of fatal cases.

TABLE.—NATURE OF THE AFFECTION OF THE LUNGS; AND THE NUMBER OF LOBES GIVING SIGNS ON ADMISSION.

Nature of Affection.	NUMBER OF LOBES GIVING PHYSICAL SIGNS ON ADMISSION.											
	MEN.						WOMEN.					
	Total No.	1	2	3	4	5	Total No.	1	2	3	4	5
Infiltration ..	252	34	51	48	35	84	135	28	37	30	16	24
Excavation ..	164	1	9	31	34	89	99	5	15	26	26	27
Fibrosis ...	24	2	5	8	4	5	14	3	3	4	1	3

*Explanation.*—The first line of this table shews the number of cases with signs of infiltration only. The second line shews the cases with excavation of one or more lobes, but in many of these there was also infiltration of other lobes. The third line gives the number of cases in which the dominant lesion was fibrosis, but in which there was no excavation.

## PULMONARY TUBERCULOSIS.

## NATURE OF AFFECTION IN RELATION TO RESULT OF TREATMENT.

Nature of Affection.	MEN.						WOMEN.					
	Total No.	*M. I.	I.	I. S. Q.	N. S. W.	Died.	Total No.	M. I.	I.	I. S. Q.	N. S. W.	Died.
Infiltration ...	252	59	117	39	26	11	135	34	62	10	17	12
Excavation ...	164	27	50	19	26	42	99	8	46	13	20	12
Fibrosis ...	24	7	14	2	—	1	14	6	7	—	1	—

\*See Definitions.

## COMPARISON OF THE NATURE OF THE AFFECTION OF THE LUNGS ON ADMISSION AND DISCHARGE OF EACH PATIENT.

## MEN.

Of 252 admitted with signs of infiltration only :—

196 were discharged with similar signs of infiltration only.

9   "       "       "       signs of excavation of one or more lobes.

36   "       "       "       signs of fibrosis       "       "       "

11 Died.

Of 164 admitted with signs of excavation in one or more lobes :—

116 were discharged with similar signs of excavation

6   "       "       "       signs of fibrosis.

42 Died.

Of 24 admitted with definite signs of fibrosis :—

22 were discharged with similar signs of fibrosis.

1 was discharged with signs of spreading infiltration masking the previous signs.

1 Died.

## WOMEN.

Of 135 admitted with signs of infiltration only :—

96 were discharged with similar signs of infiltration.

6   "       "       "       signs of excavation of one or more lobes.

21   "       "       "       "       fibrosis of one or more lobes.

12 Died.

Of 99 admitted with signs of excavation of one or more lobes :—

86 were discharged with similar signs of excavation.

1 was discharged with signs of fibrosis.

12 Died.

Of 14 admitted with definite signs of fibrosis.—

14 were discharged with similar signs of fibrosis.

## PULMONARY TUBERCULOSIS.

TABLES SHEWING THE RESULT OF TREATMENT ON THE  
TEMPERATURE CHART.

The temperature on admission is the maximum recorded during the first week of stay, and that on discharge the maximum during the last week of residence in the Hospital.

## I.—CASES WITH ONE LOBE GIVING PHYSICAL SIGNS OF DISEASE ON ADMISSION.

## TEMPERATURE ON DISCHARGE.

Temperature on  
admission.

	MEN.				WOMEN.			
	Under 99·5	99·5–101·5	Over 101·5	Died.	Under 99·5	99·5–101·5	Over 101·5	Died.
Under 99·5	24	—	—	—	24	—	—	—
99·5–101·5	6	2	1	—	10	1	1	—
Over 101·5	1	—	—	1	1	—	—	—

## II.—CASES WITH TWO LOBES GIVING PHYSICAL SIGNS OF DISEASE ON ADMISSION.

## TEMPERATURE ON DISCHARGE.

Temperature on  
admission.

	MEN.				WOMEN.			
	Under 99·5	99·5–101·5	Over 101·5	Died.	Under 99·5	99·5–101·5	Over 101·5	Died.
Under 99·5	43	2	—	—	24	1	—	—
99·5–101·5	16	3	—	—	20	1	2	—
Over 101·5	1	—	—	—	3	1	1	—

## III.—CASES WITH THREE LOBES GIVING PHYSICAL SIGNS OF DISEASE ON ADMISSION.

## TEMPERATURE ON DISCHARGE.

Temperature on  
admission.

	MEN.				WOMEN.			
	Under 99·5	99·5–101·5	Over 101·5	Died.	Under 99·5	99·5–101·5	Over 101·5	Died.
Under 99·5	48	3	—	1	20	2	—	—
99·5–101·5	19	6	2	—	15	10	7	—
Over 101·5	3	2	3	—	—	3	2	—





II.—CASES WITH TWO LOBES GIVING PHYSICAL SIGNS OF DISEASE ON  
ADMISSION.

RESULT.	History of Hæmoptysis before admission.					Actual Hæmoptysis occurring in Hospital.					
	Init- ial. Hæm.	SINGLE.		RECURRENT.		SINGLE.		RECURRENT.		FATAL.	
		Slight	Severe	Slight	Severe	Slight	Severe	Slight	Severe	Single attack	After Recur- rent at.
Much improved ...	1	8	4	3	4	—	—	—	—	—	—
Improved ...	4	15	6	18	4	—	—	2	1	—	—
<i>In statu quo</i> ...	—	1	1	2	—	—	—	1	—	—	—
Not so well ...	—	1	—	—	—	—	—	—	—	—	—
Died ...	—	—	—	—	—	—	—	—	—	—	—

III.—CASES WITH THREE LOBES GIVING PHYSICAL SIGNS OF DISEASE ON  
ADMISSION.

Much improved ...	1	5	4	1	2	1	—	—	—	—	—
Improved ...	5	12	6	20	5	—	—	1	—	—	—
<i>In statu quo</i> ...	—	—	1	5	3	1	—	1	—	—	—
Not so well ...	—	2	2	6	1	—	1	1	—	—	—
Died ...	—	—	—	—	—	—	—	—	—	—	1

IV.—CASES WITH FOUR LOBES GIVING PHYSICAL SIGNS OF DISEASE ON  
ADMISSION.

Much improved ...	—	5	4	2	2	—	1	—	1	—	—
Improved ...	2	7	8	13	8	1	—	1	—	—	—
<i>In statu quo</i> ...	2	2	2	4	2	—	—	1	—	—	—
Not so well ...	1	2	2	6	—	1	—	1	1	—	—
Died ...	1	—	—	—	3	—	1	—	1	—	1

V.—CASES WITH FIVE LOBES GIVING PHYSICAL SIGNS OF DISEASE ON  
ADMISSION.

Much improved ...	1	5	2	3	5	1	—	—	—	—	—
Improved ...	3	8	5	9	5	—	—	1	—	—	—
<i>In statu quo</i> ...	2	1	3	5	3	1	—	1	1	—	—
Not so well ...	3	6	6	9	2	1	—	2	1	—	—
Died ...	2	9	7	8	8	1	1	—	1	1	3

HÆMOPTYSIS ACTUALLY OCCURRING IN HOSPITAL IN  
RELATION TO THE NATURE OF THE LESION IN THE LUNGS.

LESION.			SINGLE.		RECURRENT.		FATAL.	
			Slight.	Severe.	Slight.	Severe.	Single Attack.	Recurrent Attack.
Infiltration	...	...	5	2	5	5	—	1
Excavation	...	...	3	1	8	3	2	4
Fibrosis	...	...	1	1	2	—	—	—



## HÆMOPTYSIS IN NON-TUBERCULOUS DISEASES OF THE CHEST.

NATURE OF DISEASE.	HISTORY OF HÆMOPTYSIS BEFORE ADMISSION				ACTUAL OCCURRENCE OF HÆMOPTYSIS IN HOSPITAL					TOTAL NO. OF CASES OF EACH CLASS OF DISEASE ADMITTED
	SINGLE.		RECURRENT		SINGLE.		RECURRENT.			
	Slight	Severe	Slight	Severe	Slight	Severe	Slight	Severe	Fatal	
Chronic Bronchitis and Emphysema	7	1	9	—	—	—	—	—	—	53
Bronchitis and Bronchial Catarrh	1	1	1	—	1	—	—	—	—	19
Bronchiectasis ...	2	1	5	1	—	—	2	1	1	30
Morbus Cordis ...	3	2	8	—	—	1	1	—	—	60
Aortic Aneurism ...	—	1	—	—	—	—	—	—	1	9

## TUBERCULIN REACTIONS IN DOUBTFUL CASES.

The Tuberculin reaction was taken in 20 cases, and proved to be positive in 8 and negative in 12. NOTE.—Of the patients so tested 19 were discharged much improved or improved, and 1, a case of Bronchiectasis, *in statu quo*.

## AGES OF PATIENTS SUFFERING FROM PULMONARY TUBERCULOSIS, WITH RESULT OF TREATMENT.

MEN.				WOMEN.			TOTAL
Age.	Much Improved. Improved.	<i>In statu quo</i> . Not so well.	Died.	Much Improved. Improved.	<i>In statu quo</i> . Not so well.	Died.	
— 5	—	—	1	1	—	—	2
—10	2	1	—	3	—	—	6
—20	34	10	7	35	15	5	106
—30	96	35	23	74	28	13	269
—40	68	39	14	29	14	3	167
—50	59	19	5	15	4	2	104
—60	18	3	2	5	—	1	29
Over 60	2	1	1	1	—	—	5

The ages of the remaining patients were unknown.

TOTAL 688

## HEREDITY.

A family history of Tuberculosis was presented by 237 patients (34·6%) of the 719, comprising 128 men (29%), and 109 women (44·1%). The grade of family taint in relation to the result of the individual cases is shewn in the following table of ACTUAL NUMBERS.

RELATIONS AFFLICTED WITH TUBERCULOSIS.	RESULT OF INDIVIDUAL CASE.					
	MEN.			WOMEN.		
	Much Improved. Improved.	<i>In statu quo.</i> Not so well	Died.	Much Improved. Improved.	<i>In statu quo.</i> Not so well	Died.
Father ... ..	19	6	1	11	4	—
Mother ... ..	12	4	—	11	4	2
Father and Mother ... ..	—	3	2	2	1	—
Father and Brothers or Sisters	4	1	—	4	3	2
Mother and Brothers or Sisters	5	1	3	6	2	1
Father and Mother and Brothers or Sisters ... ..	6	—	—	4	—	1
Brothers or Sisters ... ..	30	17	3	27	8	4
Paternal Grand-parent ... ..	—	—	—	—	—	—
Maternal Grand-parent ... ..	2	—	—	—	1	1
Paternal and Maternal Grand-parents ... ..	1	—	1	—	—	—
Collaterals on Father's side ...	4	1	2	3	—	2
Collaterals on Mother's side ...	10	1	—	4	—	1
TOTAL ... ..	92	34	12	72	23	1
Cases with no knowledge of a family history of Tuberculosis	184	74	42	90	38	10

i One case is recorded under two headings.

## ENVIRONMENT.

This was ascertained in 635 cases, which were classified as follows:—

URBAN.—Where the Patient had been born and had always lived in a city or large Town.

SEMI-RURAL.—Where the Patient had been born in the country, but had immigrated into a city or large town.

RURAL.—Where the Patient had been born and had always lived in the country.

ENVIRONMENT.	RESULT.			
	Much Improved and Improved.	<i>In statu quo.</i> Not so well.	Died.	Total.
MEN				
Urban ... ..	148	66	37	251
Semi-rural... ..	38	13	2	53
Rural ... ..	70	24	9	103
WOMEN				
Urban ... ..	112	39	16	167
Semi-rural ... ..	19	7	1	27
Rural ... ..	20	11	3	34
			TOTAL	635

It may be noted that the proportion of Urban to Semi-rural is *greater* than the proportion revealed by the census returns, though a little less than the proportion found among 7,000 Out-patients of St. Bartholomew's Hospital, the great majority of whom were not however suffering from Pulmonary Tuberculosis.

	In-Patients with Pulmonary Tuberculosis Brompton Hospital.	Out-Patients St. Bartholomew's Hospital.	General Populace.
Urban ... ..	82%	84·7%	65%
Semi-rural ... ..	18%	15·3%	35%

OCCUPATIONS FOLLOWED BY PATIENTS SUFFERING FROM  
PULMONARY TUBERCULOSIS, WITH RESULT OF  
TREATMENT.

OCCUPATION.					Much Improved and Improved	<i>In statu quo</i> Not so well	Died	Total
<b>Men. INDOOR.</b>								
Clerks	...	...	...	...	23	14	6	43
Shop Assistants (Dry goods)	...	...	...	...	11	6	2	19
" " (Grocers)	...	...	...	...	10	3	—	13
Canvassers	...	...	...	...	3	5	2	10
Warehousemen	...	...	...	...	5	2	2	9
Servants, Domestic	...	...	...	...	5	1	2	8
Telegraphists	...	...	...	...	3	—	1	4
Barmen	}	...	...	...	10	4	1	15
Cellarmen								
Waiters								
Ship's Stewards	...	...	...	...	2	1	—	3
Bakers	...	...	...	...	3	1	1	5
Compositors	...	...	...	...	13	4	1	18
Plumbers	...	...	...	...	3	1	—	4
Painters and Decorators	...	...	...	...	10	2	1	13
Upholsterers	...	...	...	...	3	—	—	3
Carpenters, Joiners, Wood-workers	...	...	...	...	16	4	—	20
Mechanics	...	...	...	...	12	11	2	25
Metal workers	...	...	...	...	5	1	2	8
Laundrymen	...	...	...	...	2	1	—	3
Tailors	...	...	...	...	10	5	1	16
Shoemakers and Leather workers	...	...	...	...	12	2	1	15
Cigar makers	...	...	...	...	3	—	—	3
Book-binders	...	...	...	...	7	1	—	8
School-boys	...	...	...	...	3	1	1	5
Various Indoor occupations	...	...	...	...	20	13	4	37
<b>MIXED.</b>							<b>TOTAL</b>	<b>307</b>
Horsekeepers and Grooms	...	...	...	...	3	1	1	5
Messengers and Porters	...	...	...	...	5	9	4	18
Sewer cleaner	...	...	...	...	1	—	—	1
							<b>TOTAL</b>	<b>24</b>

OCCUPATION.		Much Improved.	<i>In statu quo</i> Not so well	Died.	Total.
<b>Men.</b>					
OUTDOOR.					
Coachmen, Van-drivers, etc.	...	10	6	4	20
Omnibus Conductors	...	4	—	—	4
Bricklayers and Stonemasons	...	9	5	2	16
General labourers	...	26	14	9	49
Costermongers	...	2	—	—	2
Gardeners and Agriculturists	...	4	3	—	7
Blacksmiths	...	3	—	—	3
Various Outdoor occupations	...	11	1	—	12
Sailors (Deck-hands)	...	1	—	1	2
„ (Stokers)	...	2	2	—	4
Navy	...	4	3	—	7
Army	...	5	3	3	11
Police	...	—	1	—	1
TOTAL					138
<b>Women.</b>					
INDOOR.					
Housewives, and living at home	...	65	25	7	97
School-girls	...	15	4	—	19
Dressmakers, Milliners, and Tailoresses	...	20	9	3	32
Laundresses	...	5	5	—	10
Domestic Servants	...	33	12	2	47
Shop Assistants	...	4	2	1	7
Barmaids and Waitresses	...	4	2	2	8
School Teachers	...	2	1	3	6
Clerks and Typists	...	6	2	1	9
Nurses	...	2	2	—	4
Tobacco workers	...	—	1	1	2
Miscellaneous Indoor occupations	...	12	3	4	19
TOTAL					260
OUTDOOR.					
					none

## HISTORY OF INFECTION.

A definite history of contact with Pulmonary Tuberculosis was obtained in 88 cases, 59 men and 29 women, out of the total number of 719, which may be classified as follows :—

PROBABLE SOURCE OF INFECTION	MEN.	WOMEN
Patients' husbands or wives suffered from Pulmonary Tuberculosis	11	4
Patients occupied the same bedrooms as a sufferer from Pulmonary Tuberculosis	9	9
Patients nursed sufferers from Pulmonary Tuberculosis	—	7
Patients lived in same houses as sufferers from Pulmonary Tuberculosis :—		
Relatives	8	3
No relation	1	3
Patients worked in same rooms with sufferers from Pulmonary Tuberculosis	14	3
Patients were in contact with sufferers from Pulmonary Tuberculosis while in performance of military or naval duties	16	—

## SURGICAL OPERATIONS PERFORMED IN THE YEAR 1903.

	MALES.	FEMALES.
Tonsils and Adenoids... ..	25	32
Turbinectomy ... ..	1	—
Removal of Tuberculous Glands ... ..	1	4
Removal of Necrosed bone in Thumb ... ..	1	—
Fistulae ... ..	5	1
Opening of Ischio-rectal Abscess ... ..	1	—
"  "  Abscess in Neck ... ..	1	—
"  "  "  on Wrist ... ..	—	1
"  "  "  on Jaw ... ..	1	—
"  "  Dental Abscess ... ..	1	—
"  "  Spinal Abscess ... ..	—	1
"  "  Psoas Abscess ... ..	1	—
"  "  Abscess over Sternum ... ..	2	—
Resection of Ribs and Drainage of Empyema ... ..	3	—
Resection of Ribs and Drainage of } Gangrenous Focus in Lung ... }	—	1
Resection of Ribs and Drainage of Pyopneu- } mothorax ... .. }	1	—
Estlander's Operation ... ..	2	—
Tracheotomy ... ..	—	1
Excision of Epiglottis ... ..	1	—
Removal of Uterine Polypus... ..	—	1
Sounding for Calculus ... ..	1	—
Gastrostomy ... ..	2	1
Exploratory Laparotomy ... ..	1	1
Abdominal Section for Suppurative Peritonitis ... ..	—	1
Trephining for Cerebral Abscess ... ..	2	—

DENTAL OPERATIONS, TOTAL 202

M. S. PATERSON,  
F. C. SHRUBSALL.

## PATHOLOGICAL REPORT.

REPORT OF THE POST-MORTEM EXAMINATIONS MADE DURING THE YEAR 1903.

Total 107—Males 78, Females 29.

## GENERAL TABLE OF DISEASES.

Diseases.	Total	Male	Female	Remarks.
I.—DISEASES OF THE RESPIRATORY SYSTEM.				
Pulmonary Tuberculosis	62	48	14	
Pulmonary Tuberculosis and Bronchiectasis	2	1	1	The female O 226 showed in addition old mitral stenosis.
„ „ and Empyema ..	2	1	1	
„ „ and Pneumothorax	3	2	1	
„ „ and Morbus Cordis	2	1	1	
„ „ and Aneurism of Aorta ...	2	2	—	O 201, O 211.
Total cases with Pulmonary Tuberculosis	74	56	18	This includes one case of arrested tuberculosis, who died of chronic nephritis.
Bronchiectasis ...	6	6	—	Of these, O 252 died of multiple cerebral abscesses, P 34 of a cerebellar abscess, P 3 of hæmoptysis, P 4 of gangrene of the lung, O 212 of bronchitis, and P 11 of exhaustion.
Foreign body in bronchus ...	1	1	—	O 250. This case presented a bone in the right bronchus, general cylindrical bronchiectasis, septic broncho-pneumonia, and a right pyopneumothorax.
Total cases with Bronchiectasis ...	13	12	1	This includes the two cases mentioned above with pulmonary tuberculosis, one case with bronchiectasis secondary to an aortic aneurism, and three secondary to new growths in the mediastinum.
Chronic Bronchitis and Emphysema	1	—	1	
Hydatid of Lung ...	1	—	1	O 223. Sudden death from syncope ten minutes after aspiration.
Empyema ...	1	1	—	O 214. Streptococci found in the pus, and no tubercles in the pleura. No signs of pulmonary tuberculosis found, but there were caseous bronchial glands.
Sarcoma of the Mediastinum ...	3	3	—	P 22, P 30, P 36. In all three there was some bronchiectasis beyond the margins of the growth. In P 36 a pulmonary abscess had formed, and was opened during life. Four secondary growths had formed in the neighbourhood of the left corpus striatum, and trephining was performed during life on the supposition that this was a secondary cerebral abscess following the pulmonary abscess already opened.



REPORT OF THE POST-MORTEM EXAMINATIONS MADE DURING  
THE YEAR 1903.—*Continued.*

Diseases.	Total	Male	Fe- male	Remarks.
II.—DISEASES OF THE CIRCULATORY SYSTEM.				
Infective Endocarditis ... ..	2	2	—	O 206, O 259.
Chronic Valvular Disease ... ..	8	3	5	
Aneurism of the Thoracic Aorta ...	2	2	—	O 208 shewed in addition a left hæmorrhagic pleural effusion and incompetent aortic valves. P 33 showed in addition a considerable degree of bronchiectasis secondary to pressure of the aneurism on the left main bronchus. In addition, two cases of pulmonary tuberculosis were complicated by aneurism of the aorta.
III.—MISCELLANEOUS.				
Chronic Interstitial Nephritis ...	3	1	2	O 258 shewed also old arrested pulmonary tuberculosis. O 253 shewed also two aneurisms of the abdominal aorta. P 14. All three cases shewed a considerable degree of atheroma of the arteries.
Renal Calculus and Double Hydro-nephrosis	1	—	1	P 18. A girl aged 10, who presented also a large effusion of blood between the cortex and capsule of both kidneys; death occurred from uræmic coma.
Basal Meningitis secondary to a long standing Empyema	1	1	—	O 235. The empyema had been operated on fourteen days before death, and the wound was healing up. Trephining was performed a few hours before death for a cerebral abscess which (P.M.) was found in the left angular gyrus.



# SPECIAL ANALYSIS OF THE POST-MORTEM EXAMINATIONS OF 74 CASES OF PULMONARY TUBERCULOSIS.

## RESPIRATORY SYSTEM.

Laryngeal Tuberculosis	...	...	...	...	...	...	...	30
Tracheal Ulceration	...	...	...	...	...	...	...	12
Bronchial Ulceration	...	...	...	...	...	...	...	4
Bronchiectasis	...	...	...	...	...	...	...	2
Bronchitis	...	...	...	...	...	...	...	2
Emphysema	...	...	...	...	...	...	...	1
Ruptured Pulmonary Aneurism	...	...	...	...	...	...	...	12
Adherent Pleura	...	...	...	...	...	...	...	71
Pneumothorax	...	...	...	...	...	...	...	3
Serous Pleural Effusion	...	...	...	...	...	...	...	4
Empyema	...	...	...	...	...	...	...	2

## DIGESTIVE SYSTEM AND ABDOMINAL ORGANS.

General Septic Peritonitis, from deep tuberculous ulceration	...	1
General Septic Peritonitis, from perforated tuberculous ulcers	...	2
General Septic Peritonitis, cause unknown	...	1
Local Perityphlitic Abscess, tuberculous	...	1
Perityphlitic Adhesions	...	3
Tuberculous Peritonitis	...	5
Ascites	...	2
General Serous Membrane Tuberculosis	...	1
Tuberculosis of the Tonsil	...	3
"    "    "    Pharynx	...	1
Simple Ulceration of (Esophagus	...	1
Gastric Ulcer	...	3
Tuberculous Ulceration of Duodenum	...	1
"    "    "    Jejunum	...	16
"    "    "    Ileum	...	37
"    "    "    Cæcum	...	35
"    "    "    Appendix	...	26
"    "    "    Ascending Colon	...	25
"    "    "    Transverse Colon	...	16
"    "    "    Descending Colon	...	13
"    "    "    Sigmoid Flexure	...	6
"    "    "    Rectum	...	10

DIGESTIVE SYSTEM AND ABDOMINAL ORGANS.—*Continued.*

Perforated Ulcers	...	...	...	...	...	...	...	...	2
Cirrhosis of Liver	...	...	...	...	...	...	...	...	3
Fatty Liver	...	...	...	...	...	...	...	...	12
Infarction of Spleen	...	...	...	...	...	...	...	...	2
Tuberculosis of Suprarenals	...	...	...	...	...	...	...	...	1
Tuberculosis of Kidneys	...	...	...	...	...	...	...	...	2
Fatty Kidneys	...	...	...	...	...	...	...	...	3
Interstitial Nephritis	...	...	...	...	...	...	...	...	5
Infarction of Kidneys	...	...	...	...	...	...	...	...	1
Renal Calculus and Hydronephrosis	...	...	...	...	...	...	...	...	1
Tuberculosis of Epididymis	...	...	...	...	...	...	...	...	1
„ „ Vesiculæ Seminales	...	...	...	...	...	...	...	...	2
„ „ Prostate	...	...	...	...	...	...	...	...	1
„ „ Fallopian Tubes	...	...	...	...	...	...	...	...	1

*Lardaceous Disease, see below.*

## CIRCULATORY SYSTEM.

Simple Pericarditis	...	...	...	...	...	...	...	...	1
Tuberculous Pericarditis	...	...	...	...	...	...	...	...	1
Recent Endocarditis, small vegetations	...	...	...	...	...	...	...	...	3
Chronic Endocarditis, valvular disease	...	...	...	...	...	...	...	...	2
Marked Atheroma of the Aorta	...	...	...	...	...	...	...	...	5
Aortic Aneurism	...	...	...	...	...	...	...	...	2
Venous Thrombosis	...	...	...	...	...	...	...	...	5

## GLANDULAR SYSTEM.

## Cervical Glands:—

Enlarged	...	...	...	...	...	...	...	...	15
Caseous	...	...	...	...	...	...	...	...	15
Calcareous	...	...	...	...	...	...	...	...	—

## Bronchial Glands:—

Enlarged	...	...	...	...	...	...	...	...	28
Caseous	...	...	...	...	...	...	...	...	23
Calcareous	...	...	...	...	...	...	...	...	13

## Superior Mediastinal Glands:—

Enlarged	...	...	...	...	...	...	...	...	22
Caseous	...	...	...	...	...	...	...	...	19
Calcareous	...	...	...	...	...	...	...	...	1

## Anterior Mediastinal Glands:—

Enlarged	...	...	...	...	...	...	...	...	14
Caseous	...	...	...	...	...	...	...	...	9
Calcareous	...	...	...	...	...	...	...	...	1

GLANDULAR SYSTEM.—*Continued.*

## Posterior Mediastinal Glands:—

Enlarged ... ..	15
Caseous ... ..	12
Calcareous ... ..	1

## Mesenteric Glands:—

Enlarged ... ..	5
Caseous ... ..	9
Calcareous ... ..	3

## Lumbar Glands:—

Enlarged ... ..	1
Caseous ... ..	2

## OSSEOUS SYSTEM:—

Tuberculosis of Right Tarsus ..	1
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## MENINGES:—

Tuberculous Meningitis ... ..	3
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## LARDACEOUS DISEASE:—

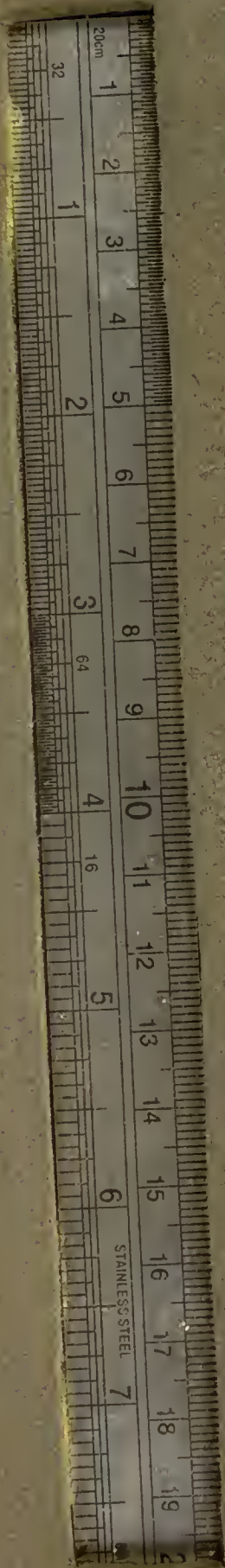
Stomach ... ..	3
Intestines ... ..	3
Liver ... ..	5
Spleen ... ..	6
Kidneys ... ..	5
Heart ... ..	2

P. HORTON-SMITH.









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